

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND | | | | | | | | | | | | | |
|--|-----------------------------------|---|---------------------------------|--|--|--|--|--|--|--|--|--|--|
| 1 Date of Request: <u>7/15/03</u> | | 2 Serial/Patent # <u>09/943,048</u> | | | | | | | | | | | |
| 3 Please refund the following fee(s): | | 4 PAPER NUMBER | 5 DATE FILED | | | | | | | | | | |
| <input type="checkbox"/> | Filing | | \$ | | | | | | | | | | |
| <input type="checkbox"/> | Amendment | | \$ | | | | | | | | | | |
| <input checked="" type="checkbox"/> | Extension of Time | 7 | <u>6/30/03</u> <u>7/1/03</u> | | | | | | | | | | |
| <input type="checkbox"/> | Notice of Appeal/Appeal | | \$ 380 | | | | | | | | | | |
| <input checked="" type="checkbox"/> | Petition | | \$ 650 | | | | | | | | | | |
| <input type="checkbox"/> | Issue | | \$ | | | | | | | | | | |
| <input type="checkbox"/> | Cert of Correction/Terminal Disc. | | \$ | | | | | | | | | | |
| <input type="checkbox"/> | Maintenance | | \$ | | | | | | | | | | |
| <input type="checkbox"/> | Assignment | | \$ | | | | | | | | | | |
| <input type="checkbox"/> | Other | | \$ | | | | | | | | | | |
| | | 7 TOTAL AMOUNT OF REFUND | | | | | | | | | | | |
| | | \$ 1,030 | | | | | | | | | | | |
| 10 REASON: | | 8 TO BE REFUNDED BY: <u>Credit Card</u> | | | | | | | | | | | |
| <input checked="" type="checkbox"/> | Overpayment | <input type="checkbox"/> Treasury Check | | | | | | | | | | | |
| <input type="checkbox"/> | Duplicate Payment | <input type="checkbox"/> Credit Deposit A/C #: | | | | | | | | | | | |
| <input type="checkbox"/> | No Fee Due (Explanation): | 9 <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| <u>Petition fee charged twice, EDT charge twice.</u> | | | | | | | | | | | | | |
| 11 REFUND REQUESTED BY: | | | | | | | | | | | | | |
| TYPED/PRINTED NAME: <u>Retta Williams</u> | | TITLE: <u>Paralegal</u> | | | | | | | | | | | |
| SIGNATURE: <u>Retta Williams</u> | | PHONE: <u>306-5594</u> | | | | | | | | | | | |
| OFFICE: <u>Petitions</u> | | | | | | | | | | | | | |
| ***** THIS SPACE RESERVED FOR FINANCE USE ONLY ***** | | | | | | | | | | | | | |
| APPROVED: <u>Alicia Kelly</u> | | DATE: <u>7/14/03</u> | | | | | | | | | | | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: